MAIL TO: Office of the Attorney General Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94293-4470

STREET ADDRESS: 1300 | Street Sacramento, CA 95814 Telephone: (916) 323-5079

WEB SITE ADDRESS: http://ag.ca.gov/charities/

COMMERCIAL COVENTURER

ANNUAL FINANCIAL REPORT FOR 20 05
(California Government Code section 12599.2)
11 Cal. Code Regs. section 308
Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees as defined in Government Code section 12586,1

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name	and Address of Commercial Coventurer:	Name and Address of Charitable Organization:
l	Number <u>CV - 14</u> 28	CT No. 3308 FELIN. No. 13-5562996
I		a and a control of
E	slockbuster inc.	Bous tairis Clubs of Lymen ca
Name	of commercial coventurer	Name of charity 1230 W. Plachtee St. nw
112	sof commercial coventurer # 2100	Address of charity
Addre	ss of commercial coventurer	Atlanta, C/A 30309
σ	allas, TX 75270	City, State, and ZIP code of chafity
	tate, and ZIP Code of commercial coventurer	
Figures	from (check one): National Campaign California Campaign	· · · · · · · · · · · · · · · · · · ·
10-6	•	1.45
III 3	(Type of activity)	(Date or dates must be shown) to 10 31 () 5 , 20
is the co	ontract between the commercial coventurer and charity based upon a fee or per-	contage of revenue? Fee Percentage & Other D KBUSTER Rewards me Mbership purchase rod was do nated to BGCA. 1380, 360.00 A.
	If other, provide brief explanation \$ 1 of each BLOC	KBUSTER Kewards @ membership purchase
1. RE	VENUE during program per	iod was donated to Back.
A.	Cash contributions	1380, 360. 00 A.
В.	Entertainment sales or admission charges	В.
C.	Sales from products	c,
D.	Advertisement sales	D, _
E.	Membership fees	E. `\
F.	Other sources: (Specify)	\ .
	a	Fa.
	b	Fb.
	C	Fc. \
	d,	Fd.
G.	TOTAL REVENUE	G.
2. EX	PENSES	•
-	Fees or commissions	Α.
	Salaries	В,
c.	Payroll taxes	С,
D.	Employee benefits	D.
E.	Cost of merchandise for resale	
F.	Cost of entertainment	F.
G.	Postage	G.
н.	Advertising	Н.
ſ.	Telephone	1,
J.	Rental of equipment	<u>,</u> J.
к.	Facilities charge	, K.
L.	Permits	L.
м.	Other expenses: (Specify)	
	a	Ma.
	b	Mb.
	c	Mc.
A1	d TOTAL EXPENSES	Md.
14.	telue mit pilopo	N.

Less additional fundralsing expenses paid by charity including fee paid to commercial coventurer (to be completed by charity)		
5. Less fair market value of goods and/or services used for the event which were paid by spensor(s) Net proceeds realized by charity from the campaign (subtract lines 4 and 5 from line 3)		
Net proceeds realized by charity from the campaign (subtract lines 4 and 5 from line 3)		
ovanturer a director, officer, or employee of the charitable o	organization listed in this report?	
Name and address of charitable organization	Relationship of officer, etc. to charitable organization	
	event which were paid by spansor(s) lines 4 and 5 from line 3) eventurer a director, efficer, or employee of the charitable o	

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ANI (Calif	MMERCIAL COVENTURER NUAL FINANCIAL REPORT FOR 20 fornia Government Code section 12599.2) al, Code Regs. section 308 2	· .					
3.	Amount to charity (subtract line 2N from line 1G)	3.					
4.	Less additional fundraising expenses paid by charity including	l by charity)4.					
5.	Less fair market value of goods and/or services used for the ev	5.					
6.	Net proceeds realized by charity from the campaign (subtract li	6.					
7. (a) Is any director, officer, or employee of the commercial coventurer a director, officer, or employee of the charitable organization listed in this report? Yes No If "ves" complete the following:							
	Name and address of director, officer, or employee of commercial coventurer	Name and address of charitable organization	Relationship of officer, etc. to charitable organization				
L							
(b) For each affiliation identified in 7(a), attach copy of the contract between the commercial coventurer and the charity.							
belle X	er penalties of perjury, I declare that I have examined this report fyit is true, correct and complete (Commercial coventurer)	Lavaine Bland Printed name	od statements, and to the best of my knowledge and P Community AFFairs + Div. Initiatives 8/10/1				
This	report must be signed by two officers or directors of the charite	ble organization for verification.					
Sign	ature of authorized officer/director (charity)	. Printed name	Title Date				

Printed name

Signature of authorized officer/director (charity)

Date

Title